Seattle Police Department Personnel History Information Packet

The attached information contains the Seattle Police Department's **Minimum Selection Standards** AND your **Personnel History Information** packet. It is very important that you review this information carefully and understand its contents. If you do **NOT MEET** one or more of the standards, you should decline further consideration for a police officer position for the City of Seattle at this time. Your current disqualification may not keep you from applying in the future, as many situations may remedy themselves over time. Please contact the Background Investigation Unit at (206) 684-5464 to inquire further regarding your specific situation.

PLEASE NOTE

All In State Entry/Exceptional Entry Level Candidates must completely fill out the PHI packet and bring it to the <u>Physical Ability Test</u> if invited. Failure to return the PHI packet will result in disqualification from the hiring process. Make sure and attach photocopies of your driver's license, social security card, DD 214 and academy certification (if applicable). <u>Keep all other required documentation</u> (college transcripts, high school diploma, birth certificate, etc.). These documents will be submitted to the background detective assigned to your investigation.

*All Lateral Officer Candidates and Out of State Entry/Exceptional Entry Level Candidates are to submit a completed PHI packet on the day of the written civil service test.

INSTRUCTIONS TO THE APPLICANT

The information you provide in this Personal History Information Packet will be used in the investigation into your background to assist in determining your suitability for the position of Police Officer. Please fill out the questionnaire completely and accurately. Keep in mind that:

- 1. The completion of this questionnaire is mandatory.
- 2. All statements are subject to verification.
- 3. Deliberate inaccuracies or omissions may bar or remove you from further testing and employment.
- 4. All time periods in your background must be accounted for.
- 5. All information contained on the Personal History Information questionnaire and any information you provide will be reviewed with you during your pre-employment interview.

It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence, and its degree of relevance to the job you are applying for. For example, being fired from a job or having an arrest record is <u>not</u> in itself grounds for disqualification. During the investigation, the investigator will inquire into the facts surrounding such an occurrence. An evaluation will then be made of the relevance of these facts to the requirements of the job.

You must list all arrests and/or convictions even if you received a release or a pardon. You must also list the time(s) you were detained by the police for any reason. Document this information in the Criminal History section of this questionnaire.

The *Americans With Disabilities Act* prohibits employers from making medically related inquiries prior to a conditional offer of employment. Therefore, if you are completing this personal history statement before you have received a conditional offer of employment, you do not have to divulge information concerning physical or medical conditions, either past or current.

Please print in ink or type your response on this questionnaire. If a question does not apply to you, write "N/A" (not applicable) in the space provided for your answer. If you need more space to respond to a question, use the continuation sheets provided and identify the additional information with the question number.

SELECTION STANDARDS-SEATTLE POLICE OFFICER

MINIMUM STANDARDS

- 1. Applicant must be at least 20.5 years of age to be hired.
- 2. Minimum Education: Proof of high school diploma or a certified GED.
- 3. Applicant must pass the Criminal Justice Training Commission Fitness Ability Test Battery.
- 4. UNITED STATES CITIZENSHIP IS REQUIRED FOR TO BE HIRED.
- 5. MILITARY RECORD: The applicant must have been discharged under honorable conditions (fair employment laws apply).
- 6. A valid Washington State Driver's License is required prior to being hired.
- 7. TRAFFIC RECORD: An applicant's driving record will be thoroughly assessed and may be a factor for disqualification. Examples of infractions/traffic crimes that may be disqualifying include:
 - A. Driving While Intoxicated (DWI), Reckless Driving or Hit & Run Driving.
 - B. Suspension of your driver's license within five years of the date of application.
 - C. Three or more moving violations (speeding, negligent driving, etc.) in the past five years of the date of application will be carefully reviewed.
 - D. Two or more accidents within five years of the date of application, wherein applicant was judged to be at fault and/or charged with a moving violation.
- 8. CRIMINAL ACTIVITY: An applicant's criminal record, including all arrests, prosecutions, deferred prosecutions, 'Alford' pleas, and non-conviction information will be thoroughly assessed and may be grounds for disqualification. The following will be disqualifying:
 - A. Any adult felony conviction.
 - B. Any misdemeanor or felony conviction while employed in a criminal justice and/or law enforcement capacity.
 - C. Any domestic violence conviction.
- 9. EMPLOYMENT: An applicant's employment history, including any terminations, or leaving an employer in lieu of termination, will be thoroughly assessed and may be grounds for disqualification.
- FINANCIAL: An applicant's credit history, including excessive credit card debt or unresolved accounts in collection will be thoroughly assessed and may be grounds for disqualification. The following will be disqualifying:

 A. Failure to pay income tax or child support.

***Residence in the City of Seattle is not required.

SCREENING/SELECTION PROCESS

Applicants that are successful in passing the written, video, and physical ability examination and score within the top 25% of the eligible register will continue in the screening/selection process. The remaining steps in the process include the following:

- 1. Must satisfactorily complete a Department background assessment, including a pre-employment polygraph inquiry.
- 2. Must satisfactorily complete a Department oral examination administered by the Seattle Police Department.
- 3. Must demonstrate psychological stability and complete a battery of psychological tests determined by the Seattle Police Department.
- 4. Must satisfactorily complete a medical examination per Public Safety Civil Service Commission standards.

Veteran's Preference Information

Pursuant to Washington State Law, Veteran's may receive Veteran's Preference points added to their overall test score. To receive Veteran's Preference, you must have served in the armed forces, AND have been honorably discharged.

Applicants must present a DD-214 with Box 24 (Page Service-2) indicting the nature of discharge in order to receive Veteran's Preference to verify eligibility.

- The Seattle Police Department also accepts lateral transfers at this time.
- Academic degrees and prior police experience are not required for appointment.
- Academic incentive pay is not applicable; however, consideration is given in competitive promotional examinations.

SEATTLE POLICE DEPARTMENT PERSONAL HISTORY INFORMATION

Middle

SOCIAL SECURITY NO.

IN APPLICATION FOR THE POSITION OF:

First

I. NAME:

Last

List any other name, a	anas, mekname	og winding of				
DRIVERS LICENSE	#:		STATE:			
WORK PHONE:			HOME PHON	VE:		
CELL PHONE:			EMAIL:			
CLLL I HONE.			LWIAIL.			
DATE OF BIRTH:			HEIGHT:	V	VEIGHT	:
PLACE OF BIRTH:			-			
City, County or Town		V []	State			
ARE YOU A US CIT		Yes [] zen of the US	No [] fill out the infort	mation l	elow an	d bring
documentation to inte						
Certificate Number	Date	Court	City	Sta	ıte	
II.	RESI	DENCE REG	CORD			
				which y	you have	resided since
II. Start with your prese r you left high school:				which y		
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your prese			each address at	which y		
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy
Start with your presen you left high school:		king back, list	each address at		Date of	Occupancy

Na	t below all of your chi me		Dat	e of Birth			
Do any of your children receive child support or other supportive income: Yes [] No [] If yes, Explain							
-	ents, 6-Parents-in-law	, 7-Brothers, 8-Sister					
-	-	, 7-Brothers, 8-Sister					
rela	ents, 6-Parents-in-law ationship by number in	, 7-Brothers, 8-Sisten square)	rs, 9 –Forme	er Spouse/	Domest	ic Partner (in	dicate
rela	ents, 6-Parents-in-law ationship by number in	, 7-Brothers, 8-Sisten square)	rs, 9 –Forme	er Spouse/	Domest	ic Partner (in	dicate
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rela	ents, 6-Parents-in-law ationship by number in	, 7-Brothers, 8-Sisten square)	rs, 9 –Forme	er Spouse/	Domest	ic Partner (in	dicate

IV. PERSONAL REFERENCES

List five adult references (not relatives, former or present employers) you have known for at least three years (preferably the past 3 years). It is very important that you list work phone numbers for all references. You may need a list of alternative references that can be supplied to your background detective in the event some of the references cannot be contacted.

Yrs.	Name	Street Address	City	State	Zip	Home #	Work #
							·
					·		

EMPLOYMENT

Begin with your most recent job. List your complete history for the past ten years, including temporary or seasonal employment, and all periods of unemployment, schooling, or military service. THE COMPLETE ADDRESS AND PHONE NUMBER OF THE EMPLOYER

From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	on of Duties	Shift hours worked				
Name of	Supervisor and phone no.					
Name of Co-worker		Salary	Why did you leave?			
From: Name of Employer To:		Address of Employer	Phone No.	Job Title		
Description of Duties		Shift	hours worked			
Name of	Supervisor and phone no.					
Name of C	Co-worker	Salary	Why did you leave?			
From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	on of Duties	Shift	hours worked			
Name of	Supervisor and phone no.					
Name of C	Co-worker	Salary	Why did you leave?			
From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	on of Duties	Shift	hours worked			
Name of	Supervisor and phone no.					
Name of C	Co-worker	Salary	Why did you leave?			
From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	on of Duties	Shift	hours worked			
Name of	Supervisor and phone no.					
Name of C	Co-worker	Salary	Why did you leave?			

From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	n of Duties	Shift hours worked				
Name of S	Supervisor and phone no.					
Name of C	o-worker	Salary	Why did you leave	e?		
From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description of Duties		Shift	hours worked			
Name of S	Supervisor and phone no.					
Name of C	o-worker	Salary	Why did you leave	e?		
From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	n of Duties	Shift	hours worked			
Name of S	Supervisor and phone no.					
Name of C	o-worker	Salary	Why did you leave	e?		
From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	n of Duties	Shift	hours worked			
Name of S	Supervisor and phone no.					
Name of C	o-worker	Salary	Why did you leave	? ?		
From: To:	Name of Employer	Address of Employer	Phone No.	Job Title		
Description	n of Duties	Shift	hours worked			
Name of S	Supervisor and phone no.					
Name of C	o-worker	Salary	Why did you leave	e?		

From: Name of Employer Address of Employer Phone No. Job Title
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To:							
Description of I	Duties	Shift hours worked					
Name of Super	visor and phone no.						
Name of Co-wo	orker	Salary	Why did you leave?	?			
From: No.	Name of Employer	Address of Employer	Phone No.	Job Title			
Description of I	Duties	Shif	t hours worked				
Name of Super	visor and phone no.						
Name of Co-wo	orker	Salary	Why did you leave?)			
From: No.	Name of Employer	Address of Employer	Phone No.	Job Title			
Description of I	Duties	Shif	t hours worked				
Name of Super	visor and phone no.						
Name of Co-wo	orker	Salary	Why did you leave?	?			
Have you ever l	been discharged, asked	l to resign, or subjected to d	lisciplinary action? De	escribe:			
Have you been	investigated for any ty	pe of complaint? What wa	s the outcome? Descr	ribe:			
		sciplined for not meeting at what happened in each insta		ase			

VI.	EDUCATION	Ī				
List all high schoo	ls you have attended.					
Name	Location		Dates A	ttended	Graduated	
Higher Education:	List all college or Universities a	attended				
Name	Location	attenaca.	Dates	Major	Degree/GP	
VII.		CATIONS				
	PRIOR APPLI					
Have you applied Seattle Police Dep	with any other law enforcement	t agency? Ye	s[] No[J. Includ	e previous	
Date	Department	Sts	Status			
Date	Department	50	Status			
		I				
	d a background by this or any					
Year	Agency	Ba	ckground	der's Nan	ne	
Backgrounded						
		•				
VIII.	CRIMINAL H					

TRAFFIC V	IOLATIONS	
Date	City, State or Country	Details of Traffic Citations and Dispositions
TRAFFIC A	CCIDENTS	
Date	City, State or Country	Details of Accidents (Injury/Non-injury)
List any time	OFFENSES – Juvenile and Adu that you've been contacted by law a complainant, victim, or witness	w enforcement and they've taken your information
Date	City, State or Country	Details of Arrests / Offenses / Disposition – was
2	city, state of country	there only a report written? Deferred prosecution?
	ne, either as an adult or juvenile, lead the state of the	have you ever committed a crime for which you se describe below:
juvenile court	proceeding, an administrative or	nt, complainant or a witness in any criminal, civil, investigative hearing by an City, County, State, he performance of duties as a police officer.

Have you ever serv If yes, complete the		•	s of the United S	States? Yes []	No []
Branch of Service	Dates		Installation	City	State/Country
Branen or service	Butes			City	State Country
While in the militar court or by summar punishment? Yes	ry, special o	or general cou	rt martial; or resi		
X.		FINANCIAL	. INFORMATIO	ON	
of police officer. T	Therefore, fi unt of indet vior exhibite	ll in the finan- otedness in its	cial information elf will not be us your financial o	section below. Esed in evaluating	your qualifications,
Monthly salary:		\$		e (mortgage):	\$
Spouse's salary:			Rent:	- ('
Other monthly inco	me - descri	be:	Other mon	thly payments - o	describe:
Total Monthly Inco	ome:	\$	Total Mon	thly Expenditure	s: \$
Current Assets			Current Li	abilities	
Savings:		\$	T T T T T T T T T T T T T T T T T T T	e Indebtedness:	\$
Checking:		·	Long Term		·
Real Estate:			Charge Ac	counts:	
Stocks and Bonds:			Vehicles:		
Life Insurance (cas	h value of p	oolicy):	Other Liab	oilities - Describe	<u>.</u>
Vehicles:					
0.1	*1				
Other Assets - Desc	eribe:				
Total Assets:		\$	Total Liab	ilities:	\$

FINANCIAL INFORMATION CONTINUED

Please supply more information about your charge accounts, contracts or other liabilities. Name of Firm Type of Account Monthly Payment Balance Have you ever filed for or declared bankruptcy? Yes [] No [] If yes, please give details including (when, where, why). Have any of your bills ever been turned over to a collection agency? Yes [] No [] If yes, please give details below including (when, firms involved, circumstances). Have your ever had anything you purchased repossessed? Yes [] No [] If yes, please give details below including (when, firms involved, circumstances). Have your wages ever been garnisheed for any reason? Yes [] No [] If yes, please give details below including (when, where, why). Have you ever been delinquent on income tax or other tax payments: Yes [] No [] If yes, please give details below including (when, where, why).

Can you perform the essential job duties of this position with or without reasonable accommodation? Yes [] No []	
	_
Please provide any additional information regarding your background, other than medical, that your background investigator should be aware of:	

XII. VERIFYING DOCUMENTS

The following documents are required to be submitted with this completed personal history information packet:

- 1. **Enlarged photocopy** of current Driver's License
- 2. **Photocopy** of Social Security card.
- 3. **Photocopy** of DD-214 (Page Service-2) if ever in military service.

You may be required to submit the following documents if you are assigned to a background detective:

- 1. **Official copy** of your birth certificate.
- 2. **Photocopy** of your high school diploma or G.E.D.
- 3. **Official transcripts** from colleges attended with degree(s) if awarded.
- 4. **Photocopy** Naturalization papers, if foreign-born.
- 5. **Photocopy** of marriage certificate, if applicable.
- 6. **Photocopy** of divorce decree, if applicable.
- 7. **Photocopy** of official name change order, if applicable.
- 8. **Photocopy** of Passport information, if applicable.

** For Lateral & Exceptional Entry Candidates – these documents are required, prior to hire date**

- 1. Law Enforcement Academy Certification (to include dates attended, hours and when certification expires).
- 2. EVOC Certification (to include hours attended).
- 3. First Responder/First Aid Certificate.

RCW 49.44.040 provides that, "Every person who shall obtain employment or appointment to any office or place of trust, by color or aid of any false or forged letter or certificate of recommendation, shall be guilty of a misdemeanor."

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the above entries made by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

I understand that if any of the above information contains any misrepresentations or falsification or if any material information has been omitted, I may be discharged by the Seattle Police Department, regardless of the time elapsed before discovery.

I understand that this application shall remain in the possession of the Seattle Police Department.

My signature below certifies that I have read and understand this complete application, and agree to the terms and conditions outlined in this document.

Signature of Applicant	Date

Question No.	Answer

Question No.	Answer

Seattle Police Department Hiring Process Acknowledgement Minimum Standards Regarding Illegal Drug Use

I, the undersigned applicant, acknowledge that I:

- 1. Have **not** used Marijuana in the past three (3) years from the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use, **and**
- 2. Have **not** used Marijuana more than 25 times in the past ten (10) years prior to the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use, **and**
- 3. Have **not** used MDMA (ecstasy), or any other illegal drug not listed here within five (5) years prior to the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use, **and**
- 4. Have **not** illegally used prescription drugs in the past three (3) years prior to the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use, and
- 5. Have **not** engaged in the illegal use of steroids within the five (5) years prior to the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use. **and**
- 6. Have **not** used any hallucinogens, cocaine, methamphetamines or opiates within ten (10) years of the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use, **and**
- 7. Have **not** used four (4) or more controlled substances within ten (10) years of the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use, **and**
- 8. Have **not** used any illegal drug(s) or illegally used prescription drug(s) more than twenty-five (25) times in the past ten (10) years prior to the date of this Acknowledgment of Minimum Standards Regarding Illegal Drug Use, **and**
- 9. Have **not** used any illegal drug(s) while employed in a criminal justice and/or law enforcement capacity, **and**
- 10. Have **not** manufactured or cultivated illegal drug(s) for the purpose of the sales/marketing of the drug(s).

Please note that use of illegal drugs and the illegal use of prescription drugs, as used in this acknowledgment, means the use of one or more drugs, the possession or distribution of which is unlawful under the Uniform Controlled Substances Act.

Periodically, candidates have experimented with and/or casually used drugs, including illegal drugs and the illegal use of prescription drugs; however, any use in excess of the above standards shall be reason for disqualification from the SPD employment process.

By signing, you, the applicar	it, acknowledge that	you understand the SE	D Minimum Standards
Regarding Illegal Drug Use.	Print and sign your f	full name and date the	acknowledgment below:

		/
Signature		Date
First Name,	Last Name,	Middle Initial

Seattle Police Department Hiring Process Certification

The following certification regarding your personal use of illegal drugs and/or illegal use of prescription drugs shall be confirmed by a background investigation and a polygraph examination at a later date. Lack of candor will result in immediate disqualification from the Seattle Police Department's (SPD) Hiring Process.

Please note that use of illegal drugs and the illegal use of prescription drugs, as used in this certification, means the use of one or more drugs, the possession or distribution of which is unlawful under the Uniform Controlled Substances Act.

Please check **one** box in each of the following two sections:

36	Ction i	: Compliance with SPD's Minimum Standards regarding Illegal Drug Use (page 1)	
Α.	[]	I, the undersigned, am in compliance with the standards outlined in the SPD	
		Minimum Standards Regarding Illegal Drug Use found on page one of this packet.	
B.	[]	I, the undersigned, am not in compliance with the standards outlined in the SPD	
		Minimum Standards Regarding Illegal Drug Use found on page one of this packet;	
		however, I wish to submit my application for further consideration while knowing	
		that my noncompliance with the above noted standards on page one may	
		disqualify me from the SPD employment process.	
So	ction 3	Current Drug Use Inquiry	
Section 2: Current Drug Use Inquiry			
Have you experimented with and/or are you currently (within the past year from the date of			
this Certification) using illegal drugs or using prescription drugs illegally?			
	гі	VES or [] NO	
	[]	YES or [] NO	
	[]	YES or [] NO	
By s			
	igning,	you, the applicant, certify your responses above as they relate to the SPD Minimum	
	igning,		
Star	igning, ndards I	you, the applicant, certify your responses above as they relate to the SPD Minimum	
Star	igning, ndards I	you, the applicant, certify your responses above as they relate to the SPD Minimum Regarding Illegal Drug Use found on page one and your current illegal drug use.	
Star	igning, ndards I	you, the applicant, certify your responses above as they relate to the SPD Minimum Regarding Illegal Drug Use found on page one and your current illegal drug use.	
Star Prin	igning, ndards I	you, the applicant, certify your responses above as they relate to the SPD Minimum Regarding Illegal Drug Use found on page one and your current illegal drug use.	
Star Prin	igning, ndards I t and si	you, the applicant, certify your responses above as they relate to the SPD Minimum Regarding Illegal Drug Use found on page one and your current illegal drug use. gn your full name and date the certification below:	
Star Prin Sign	igning, ndards I t and si	you, the applicant, certify your responses above as they relate to the SPD Minimum Regarding Illegal Drug Use found on page one and your current illegal drug use. gn your full name and date the certification below: Date	

CONSENT TO RELEASE INFORMATION AND RELEASE FROM LIABILITY

TO WHOM IT MAY CONCERN:

I am an applicant for a position with the Seattle Police Department. The Department needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I have applied. I have authorized the Department to gather all available information regarding my employment background, personal history, and other information which may be of a confidential or privileged nature.

I, the undersigned, authorize you to furnish the Seattle Police Department any and all information that you have concerning me, including without limitation my work record, my background and reputation, my driving history, criminal history, including any arrest records and any information contained in investigatory files, my medical records, my psychological testing and analysis plus recommendation, my military service records, my education background and records, my financial status, and such other information and records as you may have in your possession relating to me. Information of a confidential or privileged nature may be included in the materials you provide to Seattle Police Department. I further specifically consent to the Washington Department of Revenue's release of any tax returns, as defined by RCW, that pertain to me. I request your cooperation in supplying this information to the Seattle Police Department.

I hereby agree to release you and those who supplied you with the above information, your company or organization, and the City of Seattle, its employees and the Seattle Police Department from any liability for any damage which may result from furnishing the requested information.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Seattle Police Department in conjunction with employment procedures. I will make no attempt to gain access to the information provided by you to the Seattle Police Department. The information attained will not be shared with Executive Services Department.

Applicant's First, Middle and Last name (please print)	Date of Birth
Applicant's Signature	Date
Applicant's Current Address	Phone Number
Social Security Number	Check Picture ID □
Driver's License number or State I.D. number	Issuing State
Subscribed and sworn to before me on the day of	
Notary Public in and for the State of	
residing at the city of	·
My commission avniras	

NOTE: A photocopy reproduction of this request shall be for all intents and purposes as valid as the original.

USE OF CREDIT REPORTS FOR EMPLOYMENT PURPOSES AUTHORIZATION TO BE SIGNED AS A CONDITION OF EMPLOYMENT

By completing and signing this document, I agree that the Seattle Police Department may obtain a consumer credit report or other information regarding me and may consult its own files for my credit report. I understand that this information will be used only for employment purposes.

Please fill out this document completely. NOTE: Failure to complete this document will remove you from further consideration for employment.

Print Applicant's Last Name, First Name, Middle Initial	
Social Security Number	
Current Street Address	
City, State, Zip Code	
Home Area Code and Telephone Number	
Applicant Signature	
Date	
Notary Public	Date
Address	Expiration Date